

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of	Allowed August 20, 2009
Gunnar NORMARK	Conf. 5635
Application No. 10/542,986	Group 2181
Filed July 21, 2005	Examiner Benjamin P. GEIB
METHOD IN PIPELINED DATA PROCESSING	

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents	October 19, 2009
P.O. Box 1450	
Alexandria, VA 22313-1450	

Sir:

Receipt is acknowledged of the Filing Receipt for  
Serial No. 10/542,986.

It is requested that a new Filing Receipt be issued on  
which the number of the foreign priority document is correctly  
given as 0300198-9 (not 03000198-9), as shown by the accompanying  
originally-filed Application Data Sheet (page 3).

Respectfully submitted,

YOUNG & THOMPSON

*Benoit Castel*

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Application Information Sheet

Application Information

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?:	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?:	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	A METHOD IN PIPELINED DATA PROCESSING
Attorney Docket Number::	1533-1003
Request for Early Publication?:	No
Request for Non-Publication?:	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?:	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?:	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?:	No

Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: GUNNAR  
Middle Name::  
Family Name:: NORDMARK  
Name Suffix::  
City of Residence:: DANDERYD  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing HASTHAGSVAGEN 13  
Address::  
City of Mailing Address:: DANDERYD  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: SE-182 39

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: THOMAS  
Middle Name::  
Family Name:: BODEN  
Name Suffix::  
City of Residence:: SOLNA  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing HAGALUNDSGATAN 42  
Address::  
City of Mailing Address:: SOLNA

State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-169 64

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer Number::	00466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application:	National Stage of	PCT/SE04/000103	1/27/04
PCT/SE04/000103	An application claiming the benefit under 35 USC 119(e)	60/319,941	2/12/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0300198-9	1/28/03	Yes

**Assignment Information**

Assignee Name::  
Street of Mailing  
Address::  
City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address::  
Postal or Zip Code of Mailing Address::